FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, lowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State

Parties must be filed electronically.

Reset Form

2014 OCT 16 AM 9: 4
DISCLOSURE

	INCSCE I C	1111	
COMMITTEE NAME (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (Must be same as on Statement of Organical Committee Name (ganization)		
CITIZENS FOR WOOD		1 [FORM
IMPORTANT: Indicate by # type of committee you are reporting for (1) Statewide/Legislative/Judge Standing for Retention Candidate (4) County Central Committee (5) County Candidate (6) City Cansubdivision Candidate (8) County PAC (9) City PAC (10) School 1) Local Ballot Issue	(2)State PAC (3)State Party	al l	DR-2 DISCLOSURE REPORT
CANDIDATE COMMITTEES ONLY:		-	Comm. # 3001
GEORGE C WOOD	Political Party (if applicable)		ogged In
Office Sought COUNTY PUBLIC HOSPITAL TRUSTEE POL	District (if Senate or House)		Computer
Late reports are subject to possible civil and criminal penalties. Pucandidate's committee, and the chairperson, for any other type of	ursuant to lowa Code sections 68B.32A committee, is the individual responsible	(7) and 68 e for filing	AA.401(3), the candidate, for a timely and accurate reports.
Eugene Fr Weber	(515)276-6587 TELEPHONE		10-15-2014
SIGNATURE OF PERSON FILING REPORT	TELEPHONE	-	10-15-2014 DATE SIGNED
I AM FILING A 10-14-2014	PEPOPT FOR (4) FL FOTION	//0.210	
(report date)	REPORT FOR (1) ELECTION		ELECTION YEAR.
CHECK IF AMENDMENT TO REPORT DATED	Indicate by	# [1]	
		Local Com	mittees, enter Date of Election
Check if this is final (termination) report and attach Notice (You must continue to file reports until a DR-3 is filed	of Dissolution Form DR-3. f.)	County & I which Elect POLK	ocal Committees, enter County in tion is held
STATEMENT OF CASH ON HAND			
CASH ON HAND at the beginning of the reporting period. (To			
committee. This amount MUST be the same as the of the last reporting period or must be zero if this is fi	cash on hand at the end	\$	0.00
ADD TOTAL MONEY TAKEN IN THIS PERIOD		•	
Schedule A: Cash Contributions total (Attach Sched	ule A) (*also see in-kind below)		1,760.00
Schedule F: Loans Received total (Attach Schedule	F)		
Schedule H: Total Sales of Campaign Property (Atta	ch Schedule H)		
(Schedule H applies to Candidates' Comm	mittees Only)		
	SUB-TOTAL	\$	1,760.00
SUBTRACT TOTAL MONEY SPENT THIS PERIOD			
Schedule B: Expenditures total (Attach Schedule B)	(**also see debts and loans below)		885.92
Schedule F: Loan Repayments total (Attach Schedul	e F)		
CASH ON HAND at the end of this reporting period (if final rep	ort balance must be zero)	\$	874.08
*UNPAID BILLS (From Schedule D - Attach Schedule D)			0.00
IN KIND CONTRIBUTIONS (From Schedule E - Attach Sched	lule F\	\$	0.00
*OUTSTANDING LOANS (From Schedule F - Attach Schedul	o E)	\$	
CONSULTANT BREAKDOWN (Schedule G Attached?)	eг)	\$	
CANDIDATE COMMITTEES ONLY:		-	YES ✓ NO
ALUE OF CAMPAIGN PROPERTY (From Schedule H - Attac		\$	
TATE COMMITTEES: Submit a reconciled campaign account	t bank statement in January of each	year.	

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN (Including candidate's personal funds)

(Rev. 12/13)	MONETARY RECEIPTS
	CK THIS BOX IF

COMMITTEE NAME (Must be same as on Statement of Organization) CITIZENS FOR WOOD

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

FOR DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FUND- RAISER INCOME
10-1-14	ID# CK#	MARY GREEN 3524 GRAND AVE DES MOINES, IA 50312		\$50.00	
10-3-14	ID# CK#	DENNIS ELWELL PO BOX 187 ANKENY, IA 50021		200.00	
10-3-14	ID#	MARK CLARK 906 27TH STREET WEST DES MOINES, 50265		200.00	
10-3-14	ID#	HARLAN HOCKENBERG 2100 WESTOWN PARKWAY WEST DES MOINES, JA 50265		25.00	
10-3-14	ID#	CAROLE TURNQUIST 4224 67TH STREET URBANDALE, IA 50322		25.00	
10-9-14	ID# CK#	R. E. MEISENHEIMER 6741 BRAMWELL CT JOHNSTON, IA 50131		50.00	
10-13-14	ID#	PEGGY LAMMERS 1540 DOVER BAY DR CLIVE, IA 50325		25.00	
	ID#				
	ID# CK#				
	ID# CK#				
		TOTAL (if last page	SUB-TOTAL ge of this schedule)	\$ 575.00	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no applicable" in the relationship column. (for Schedule A)

familial relationship,

1760.00

For Instructions, See Back of Form

Reset Form

(Rev. 12/13)	MONETARY RECEIPTS
SCHEDULE	

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
CITIZENS FOR WOOD

CHECK THIS BOX IF AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

FOR DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FUND- RAISER
9-5-14	ID# CK#	JOHN C STRATHMAN 36584 MEADOW LANE CUMMING, IA 50061		\$250.00	INCOME
9-5-14	ID# CK#	REBECCA WEBB 1411 MAIN ST NORWALK, IA 50211		200.00	
9-5-14	ID#	ENGLER EMBROIDERY 330 1ST STREET WEST DESMOINES, IA 50265		50.00	
9-9-14	ID#	LOU ANN SANDBURG 1776 NW 131 ST STREET CLIVE, IA 50325		100.00	
9-9-14	ID# CK#	ERNEST RUDOLPH PO BOX 241 DESOTO, IA 50069		200.00	
9-9-14	ID# CK#	JACK WAHLIG 13791 BAY HILL COURT CLIVE, IA 50325		100.00	
9-12-14	ID# CK#	RONALD HUFF 6101 CRESENT CHASE JOHNSTON, IA 50131		100.00	
9-19-14	ID# CK#	ELDON HUSTON 611 TERRACE DR JOHNSTON, IA 50131		100.00	
9-19-14	ID# CK#	GLORIA HOFFMAN 4200 LEONARD PLACE DES MOINES, IA 50310		25.00	
10-1-14	ID# CK#	JOY CORNING 2880 GRAND AVE DES MOINES, IA 50812		60.00	
			SUB-TOTAL	\$ 1185.00	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no applicable" in the relationship column.

(for Schedule A)

TOTAL (if last page of this schedule)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY
The state of the s	ECK THIS BOX IF

COMMITTEE NAME (Must be same as on Statement of Organization)

CITIZENS FOR WOOD

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED	
9-5-14	ID# CK#95	4:15 COMMUNICATIONS 4710 MILES CIVIC PKWY WEST DES MOINES IA 50265	FACE BOOK PAGE CONSULTING	\$ 65.00	
9-11-14	ID# CK# 96	GREG MORRILL 3333 GRAND AVE DES MOINES, IA 50312	DESIGN POSTCARDS & BUSINESS CARDS	80.00	
9-12-14	ID# CK# 97	GEORGE C WOOD 4710 GEORGE MILLS PKWY WEST DES MOINES,IA 50265	REIMBURSE-CP CARTER PRINTINGPOST CARDS & BUSINESS CARDS	323.30	
9-16-14	ID# CK#	HARLAND CLARK/ WELLS FARGO BANK URBANDALE, IA	CHECK PRINTING 24.23		
9-25-14	ID# CK# ₉₈	GEORGE C WOOD 4710 GEORGE MILLS PKWY WEST DES MOINES, IA 50265	REIMBURSE-4 INVOICES FAST SIGN-MAG SIGN-113.95BANNER-68.90		
	ID# CK#		FACEBOOK-ADVERTISE-42.61 FACEBOOK-ADVERTISE-50.43	275.89	
9-25-14	ID# CK# ₁₀₀₁	LINDA RUDOLPH PO BOX 241 DESOTO, IA 50069	TABLE-DINNER TICKETS-DISPLAY TABLE IOWA FAITH & FREEDOM COALITION	117.50	
	ID# CK#				
			SUB-TOTAL	\$ 007.00	

SUB-TOTAL

TOTAL (if last page of this schedule)

\$ 885.92 \$ 885.92

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page 1	of 1
--------	------